



IN REPLY REFER TO:

United States Department of the Interior

NATIONAL PARK SERVICE
Mojave National Preserve
2701 Barstow Road
Barstow, California 92311

APPLICATION REQUIREMENTS FOR A SPECIAL PARK USE PERMIT FOR FILMING/PHOTOGRAPHY

In response to your inquiry concerning Special Park Use, enclosed is a Special Park Use Application Worksheet for you to complete and return to us. It is important that the worksheet be as detailed as possible concerning your proposed activity. For example, we must know where you propose to conduct your activity or, event; the number of participants; what type of equipment you will use; *and* any special effects you may wish to use. Please allow a **minimum of 21 business days** for processing.

If you are not familiar with the area, it is advisable to make an advance-scouting trip for routes and/or locations. You will not be permitted to arrive and then select routes/locations on the day of the event.

For guided tours, sporting events or other organized gatherings, you will need to attach a copy of advertisements, flyers, brochures, and all information sent to participants.

The information on the worksheet will be utilized by the National Park Service (NPS) staff to evaluate the impact of your activity on park resources and visitors, the appropriate type of permit, and any additional fees required. It may require-several weeks to review your request and render a decision.

A non-refundable \$100 application fee is required from all applicants, regardless of whether or not the permit is issued. This payment must accompany the permit worksheet. Please make your payment out to **National Park Service**.

The NPS has the authority to collect or recover from Special Park Use Permittees any or all of the costs associated with the special use activities. If the permit application is approved, an administrative processing fee (\$155.00) and monitoring fees (minimum of two hours at \$50.00/hour) may be charged to the permittee. Location fees will be charged based on the number of people and number of days involved. The sole exception to location fees is as follows:

"Commercial videographers, cinematographers, or sound recording crews of up to two people with only minimal equipment (i.e., one camera and one tripod) working in areas open to the public are required to obtain a commercial filming permit and are subject to appropriate permit terms and conditions and cost recovery charges but are not subject to location fees."

If your request is approved a Certificate of Insurance will be required showing that you have general liability insurance coverage of \$1,000,000. This certificate must name the **United States Government /National Park Service/Mojave National Preserve** as "additional insured". Other coverage limits may be required based on the requested activity. If required, we will need an **original** certificate of insurance for our files. The permittee's name must be on the Certificate Insurance.

A performance bond (cash or cashier's check) may also be required. The amount of the bond will be determined from the information provided on the worksheet. This bond will be returned to you upon completion of your activity if all stipulations have been met and park resources have not been damaged.

Please submit the enclosed Application Worksheet and your permit processing fee (payable to the National Park Service) via US Mail, UPS or Federal Express to the address below. You may email or FAX the worksheet, with the original signed application worksheet and application fee to follow.

National Park Service, Mojave National Preserve
Attention: Special Use Permits
2701 Barstow Road
Barstow, CA 92311

tel: (760) 252-6107
fax: (760) 252-6174
email: moja_sup@nps.gov

**UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE
Mojave National Preserve
2701 Barstow Road, Barstow, CA 92311
Application for Photography/Filming Permit - Long Form**

Date _____ **1st Unit** _____
Date _____ **2nd Unit** _____

GENERAL INFORMATION

Company Name	Applicant/Agent
Address	Address
City/State/Zip	City/State/Zip
Phone #	Phone #
FAX #	Beeper #
Producer	Photographer/Director
Insurance Co.	Name of Project/Client:
Federal Tax No. or Social Security No:	

Type of Project:

- | | | | |
|--------------------------|-------------------------------|--------------------------|---------------------|
| • Stills, editorial | • Stills, advertising | • Stills, other | • Stock video/photo |
| • Feature Film /TV Movie | • TV Series/Pilot | • Documentary/Travelogue | • Commercial |
| • Music Video | • Public Service Announcement | • Infomercial | • Industrial |
| • Other (explain) _____ | | | Sound • Yes • No |

Summary of scene(s)

SITE INFORMATION:

Total number of days on site: _____ Shoot _____ Prep _____ Strike _____ Hold _____
Night work: • No • Yes (explain)

SHOOTING SCHEDULE BY LOCATION:

DATE	LOCATION	Start Time	End Time	FILM	PREP	STRIKE
				•	•	•
				•	•	•
				•	•	•
				•	•	•

- Exteriors:
- Interior: Building name _____ • Other (explain)

Set dressing or other structures proposed: • No • Yes (explain)

To request set construction, off-road activity, trail use, or interior use of building, attach detailed information including proposed Site Plan.

Electrical needs (explain)

Generator: • No • Yes (size)

Lighting: • None • Reflectors only • Yes (explain)

Road: _____ Date/time: _____ • Closure requested

• Running shots • Driving shots • Drive-bys • Tow shots • Drive-ups & Away • Wet down road

• Camera/Equipment on Road Shoulder • Camera/Equipment on median • Other (explain)

OPERATIONAL INFORMATION:

Number of Personnel and Vehicles:

Total Cast & Crew _____ Personal Cars _____ Large Trucks _____ Other Trucks _____ Vans _____

Camera Car _____ Picture Cars _____ Motor homes _____ Dressing Rooms

Other Vehicles (explain)

Base Camp location

Catering Co. Name _____ Phone # _____

SPECIAL ACTIVITIES:

Children: • None • Yes, # of Children _____ Age Range _____

Animals: • None • Yes (explain) _____

Trainer Name: _____ Phone # _____

Aircraft: • No • Yes (explain)

Special Effects: (identify)

Effects Technician Name: _____ Phone # _____

License # (if applicable) _____ Permit # (if applicable)

Stunts: (explain) _____

Coordinator _____ Phone # _____

Any other unusual or hazardous activities, explain

Attach pages to provide additional information for permit consideration.

Person on location responsible for company's adherence to all terms & conditions of Film Permit:

Name: _____ Title: _____ Phone: _____

Person on location responsible for coordinating activities with the NPS:

Name: _____ Title: _____ Phone: _____

Person at the company office to contact for follow up information and billing:

Name: _____ Title: _____ Phone: _____

I hereby state that the above information given is complete and correct, and that no false or misleading information or false statements have been given. All estimates are reliable to the best of my knowledge and I have the full authority to represent the applicant/production company and the project described above.

Signature _____ **Title** _____ **Date** _____

Company Name _____

Information provided will be used to determine whether a permit will be issued. Completed application must be accompanied by an application fee in the form of a cashiers check or money order made payable to **National Park Service**. Application and administrative charges are non-refundable. *This completed application should be mailed to Park address information.*

Note that this is an application only, and does not serve as permission to conduct a filming project or any other use of the park. If your request is approved, a permit containing applicable conditions and regulations will be sent to the person designated on the application. The permit must be signed and returned to the park prior to the event.

Paperwork Reduction Act Statement: This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. All the applicable parts of the form must be completed.

Estimated Burden Statement: Public reporting burden for this form is estimated to average 60 minutes per response including the time it takes to read, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the National Park Service Program Manager, Special Park Uses, Ranger Activities Division, 1849 C Street, NW., Washington, D.C. 20240 and to the Information Collection Clearance Officer, Washington Administrative Program Center, 1849 C Street NW., Washington, D.C. 20240. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.